

Fill in this information to identify your case:

United States Bankruptcy Court for the:
NORTHERN DISTRICT OF TEXAS

Case number (if known): _____ Chapter you are filing under:

- ☐ Chapter 7
☐ Chapter 11
☐ Chapter 12
☒ Chapter 13

☐ Check if this is an amended filing

Official Form 101**Voluntary Petition for Individuals Filing for Bankruptcy****12/17**

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if

a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for

Part 1: Identify Yourself**About Debtor 1:****About Debtor 2 (Spouse Only in a Joint Case):****1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture

David

First Name

Joe

Middle Name

Vilardi

Last Name

Suffix (Sr., Jr., II, III)

Carolyn

First Name

Dot

Middle Name

Vilardi

Last Name

Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

First Name

Middle Name

Last Name

First Name

Middle Name

Last Name

Carolyn

First Name

Dot

Middle Name

Kidwell

Last Name

Carolyn

First Name

Dot

Middle Name

Kidwell-Vilardi

Last Name

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)xxx - xx - 4 0 5 5

OR

9xx - xx - _____

xxx - xx - 1 4 1 0

OR

9xx - xx - _____

Debtor 1 **David Joe Vilardi**
Carolyn Dot Vilardi

Case number (if known) _____

About Debtor 1:

About Debtor 2 (Spouse Only in a Joint Case):

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and doing business as

☒ I have not used any business names or EINs.

☒ I have not used any business names or EINs.

Business name _____

Business name _____

Business name _____

Business name _____

Business name _____

Business name _____

EIN _____

EIN _____

EIN _____

EIN _____

5. Where you live

411 N Beverly Drive

Number Street

Number Street

Wichita Falls TX 76306

City State ZIP Code

Wichita

County

City State ZIP Code

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street

Number Street

P.O. Box

P.O. Box

City State ZIP Code

City State ZIP Code

6. Why you are choosing this district to file for bankruptcy

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district

☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Check one:

☒ Over the last 180 days before filing this petition, I have lived in this district

☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one: (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

☐ Chapter 7

☐ Chapter 11

☐ Chapter 12

☒ Chapter 13

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

8. How you will pay the fee

- ☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your
- ☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).
- ☐ **I request that my fee be waived.** You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the

9. Have you filed for bankruptcy within the last 8 years?

- ☐ No
- ☒ Yes.

District Nothern District of Texas When 11/30/2016 Case number 16-70190
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

- ☒ No
- ☐ Yes.

Debtor _____ Relationship to you _____

District _____ When _____ Case number, _____
MM / DD / YYYY if known

Debtor _____ Relationship to you _____

District _____ When _____ Case number, _____
MM / DD / YYYY if known

11. Do you rent your residence?

- ☒ No. Go to line 12.
- ☐ Yes. Has your landlord obtained an eviction judgment against you?
- ☐ No. Go to line 12.
- ☐ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A)

Debtor 1 **David Joe Vilardi**
Carolyn Dot Vilardi

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

- 12. Are you a sole proprietor of any full- or part-time business?**

- ☒ No. Go to Part 4.
☐ Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one

 Name of business, if any

 Number Street

 City

 State

 ZIP Code

Check the appropriate box to describe your business:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☐ None of the above

- 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

For a definition of small business debtor, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

- ☒ No. I am not filing under Chapter 11.
☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

- 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs**

- ☒ No
☐ Yes. What is the hazard?

If immediate attention is needed, why is it needed?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs

Where is the property?

 Number Street

 City

 State

 ZIP Code

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose

About Debtor 1:

You must check one:

☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency,

☐ I am not required to receive a briefing about credit counseling because of:

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☒ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency,

☐ I am not required to receive a briefing about credit counseling because of:

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the

Debtor 1 **David Joe Vilardi**
Carolyn Dot Vilardi

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

- 16. What kind of debts do you have?**
- 16a. Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."
- ☐ No. Go to line 16b.
☒ Yes. Go to line 17.
- 16b. Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.
- ☐ No. Go to line 16c.
☐ Yes. Go to line 17.
- 16c. State the type of debts you owe that are not consumer or business debts.**
- _____
- 17. Are you filing under Chapter 7?**
- ☒ No. I am not filing under Chapter 7. Go to line 18.
- ☐ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- ☐ No
☐ Yes
- 18. How many creditors do you estimate that you owe?**
- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |
- 19. How much do you estimate your assets to be worth?**
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input checked="" type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |
- 20. How much do you estimate your liabilities to be?**
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input checked="" type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known) _____

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this

X /s/ David Joe Vilardi _____

David Joe Vilardi, Debtor 1

Executed on 07/30/2019
MM / DD / YYYY

X /s/ Carolyn Dot Vilardi _____

Carolyn Dot Vilardi, Debtor 2

Executed on 07/30/2019
MM / DD / YYYY

Debtor 1 **David Joe Vilardi**
Carolyn Dot Vilardi

Case number (if known) _____

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to

X /s/ MONTE J WHITE _____

Signature of Attorney for Debtor

Date **07/30/2019**

MM / DD / YYYY

MONTE J WHITE

Printed name

Monte J. White & Associates, P.C

Firm Name

1106 Brook Avenue

Number Street

Wichita Falls

City

TX

State

76301

ZIP Code

Contact phone **(940) 723-0099**

Email address **legal@montejwhite.com**

00785232

Bar number

TX

State

Fill in this information to identify your case and this filing:

| | | | |
|--|---|--|--|
| Debtor 1 | David <small>First Name</small> | Joe <small>Middle Name</small> | Vilardi <small>Last Name</small> |
| Debtor 2 (Spouse, if filing) | Carolyn <small>First Name</small> | Dot <small>Middle Name</small> | Vilardi <small>Last Name</small> |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF TEXAS | | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In**1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

- ☐ No. Go to Part 2.
☒ Yes. Where is the property?

1.1.

411 North Beverly Dr

Street address, if available, or other description

| | | |
|----------------------|----------------------|-------------------------|
| Wichita Falls | TX | 76306 |
| <small>City</small> | <small>State</small> | <small>ZIP Code</small> |

Wichita
County

TR 52-F LOT 1-A 0.85 ACS BLK 5

What is the property?

Check all that apply.

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property?

Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claim in **Schedule D: Creditors Who Have Claims Secured by Property.**

| | |
|--|--|
| Current value of the entire property? | Current value of the portion you own? |
| \$110,000.00 | \$110,000.00 |

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Homestead

☒ Check if this is community property (see instructions)

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

1.2.

1707 Pearl Avenue

Street address, if available, or other description

Wichita Falls

City

TX

State

76301

ZIP Code

Wichita

County

LOT 4 BLK 52 SOUTHLAND

What is the property?

Check all that apply.

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other

Who has an interest in the property?

Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: 133193

Do not deduct secured claims or exemptions. Put the amount of any secured claims in **Schedule D: Creditors Who Have Claims Secured by Property.**

Current value of the entire property?

\$94,629.36

Current value of the portion you own?

\$94,629.36

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Owner

1.3.

1503 Grant Street

Street address, if available, or other description

Wichita Falls

City

TX

State

76309

ZIP Code

Wichita

County

LOTS 13&14 BLK 70 FLORAL HEIGHTS

What is the property?

Check all that apply.

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other

Who has an interest in the property?

Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: 148958

Do not deduct secured claims or exemptions. Put the amount of any secured claims in **Schedule D: Creditors Who Have Claims Secured by Property.**

Current value of the entire property?

\$98,893.80

Current value of the portion you own?

\$98,893.80

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Owner

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

1.4.

2402 Lansing Blvd

Street address, if available, or other description

Wichita Falls

City

TX

State

76309

ZIP Code

Wichita

County

LOT 15 BLK 1 FOUNTAIN PARK 1A

What is the property?

Check all that apply.

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other _____

Who has an interest in the property?

Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: 148092

Do not deduct secured claims or exemptions. Put the amount of any secured claims in **Schedule D: Creditors Who Have Claims Secured by Property.**

Current value of the entire property?

\$97,697.98

Current value of the portion you own?

\$97,697.98

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Owner

☒ **Check if this is community property**
(see instructions)

1.5.

409 North Beverly

Street address, if available, or other description

Wichita Falls

City

TX

State

76306

ZIP Code

Wichita

County

90X125 FT BLK 52 WICHITA GARDENS

What is the property?

Check all that apply.

- ☒ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare
- ☐ Other _____

Who has an interest in the property?

Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: 126239

Do not deduct secured claims or exemptions. Put the amount of any secured claims in **Schedule D: Creditors Who Have Claims Secured by Property.**

Current value of the entire property?

\$49,856.92

Current value of the portion you own?

\$49,856.92

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Owner

☒ **Check if this is community property**
(see instructions)

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

1.6.

121 North Avenue D

Street address, if available, or other description

Burkburnett

City

TX

State

76354

ZIP Code

Wichita

County

LOT 6 BLK 1 HARDIN**What is the property?**

Check all that apply.

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property?

Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another _____

Other information you wish to add about this item, such as local property identification number: **121911**Do not deduct secured claims or exemptions. Put the amount of any secured claims on **Schedule D: Creditors Who Have Claims Secured by Property.****Current value of the entire property?****\$48,607.32****Current value of the portion you own?****\$48,607.32**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Owner

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here..... ➔

\$499,685.38**Part 2: Describe Your Vehicles**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? **Yes** **Schedule G: Executory Contracts and Unexpired Leases.**
you own that someone else drives. If you lease a vehicle, also report it.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

3.1.

Make:

Nissan

Model:

Rogue

Year:

2013

Approximate mileage:

60,000

Other information:

2013 Nissan Rogue (approx. 60,000)

Who has an interest in the property?

Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another _____

☒ Check if this is community property (see instructions)Do not deduct secured claims or exemptions. Put the amount of any secured claims on **Schedule D: Creditors Who Have Claims Secured by Property.****Current value of the entire property?****\$15,000.00****Current value of the portion you own?****\$15,000.00**

3.2.

Make:

Ford

Model:

F150

Year:

2001

Approximate mileage:

184,000

Other information:

2001 Ford F150 (approx. 184,000)

Who has an interest in the property?

Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another _____

☒ Check if this is community property (see instructions)Do not deduct secured claims or exemptions. Put the amount of any secured claims on **Schedule D: Creditors Who Have Claims Secured by Property.****Current value of the entire property?****\$1,500.00****Current value of the portion you own?****\$1,500.00**

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories*Examples:* Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories☒ No☐ Yes**5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....** →**\$16,500.00****Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.**6. Household goods and furnishings***Examples:* Major appliances, furniture, linens, china, kitchenware☐ No☒ Yes. DescribeAppliances
Couch
Bedroom Set**\$1,500.00****7. Electronics***Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games☐ No☒ Yes. DescribeTV (3)
Cell Phone**\$300.00****8. Collectibles of value***Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles☒ No☐ Yes. Describe**9. Equipment for sports and hobbies***Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments☒ No☐ Yes. Describe**10. Firearms***Examples:* Pistols, rifles, shotguns, ammunition, and related equipment☐ No☒ Yes. Describe

See continuation page(s).

\$700.00**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories☐ No☒ Yes. Describe

Clothing

\$100.00

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known) _____

12. Jewelry*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☐ No☒ Yes. DescribeWedding Rings
Diamond Necklace
Gold Rings

\$5,000.00

13. Non-farm animals*Examples:* Dogs, cats, birds, horses☐ No☒ Yes. Describe

See continuation page(s).

\$0.00

14. Any other personal and household items you did not already list, including any health aids you did not list☒ No☐ Yes. Give specific information.....**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here..... →**

\$7,600.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?
Do not deduct secured claims or exemptions.**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition☒ No☐ Yes..... Cash:**17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.☐ No☒ Yes.....

Institution name:

17.1. Checking account: _____ \$0.00

17.2. Savings account: Savings account Union Square \$25.00

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts☒ No☐ Yes..... Institution or issuer name:

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known) _____

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture☒ No☐ Yes. Give specific information about them.....

Name of entity: _____

% of ownership: _____

20. Government and corporate bonds and other negotiable and non-negotiable instruments*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.☒ No☐ Yes. Give specific information about them.....

Issuer name: _____

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans☐ No☒ Yes. List each

account separately. Type of account: _____ Institution name: _____

Retirement account: _____ **\$0.00****22. Security deposits and prepayments**Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others☒ No☐ Yes.....

Institution name or individual: _____

23. Annuities (A contract for a specific periodic payment of money to you, either for life or for a number of years)☒ No☐ Yes.....

Issuer name and description: _____

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No☐ Yes.....

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit☒ No☐ Yes. Give specific information about th**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;***Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements☒ No☐ Yes. Give specific information about th**27. Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses☒ No☐ Yes. Give specific information about th

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known) _____

Money or property owed to you?**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.**28. Tax refunds owed to you**☒ No☐ Yes. Give specific information about them, including when you already filed the return and the tax years.....

Federal: _____

State: _____

Local: _____

29. Family support*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement☒ No☐ Yes. Give specific information

Alimony: _____

Maintenance: _____

Support: _____

Divorce settlement: _____

Property settlement: _____

30. Other amounts someone owes you*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else☒ No☐ Yes. Give specific information**31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance☐ No☒ Yes. Name the insurance company of each policy and list its value.....

Company name:

Beneficiary:

Surrender or refund value:

Term Life Insurance with Jackson

David Vilardi

\$0.00

Term Life Insurance with State of

\$0.00

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

☒ No☐ Yes. Give specific information**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue☒ No☐ Yes. Describe each claim**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**☒ No☐ Yes. Describe each claim

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known) _____

35. Any financial assets you did not already list☒ No☐ Yes. Give specific information _____**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here..... →****\$25.00****Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?**☒ No. Go to Part 6.☐ Yes. Go to line 38.**Current value of the
portion you own?**
Do not deduct secured
claims or exemptions.**38. Accounts receivable or commissions you already earned**☒ No☐ Yes. Describe _____**39. Office equipment, furnishings, and supplies***Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones,
desks, chairs, electronic devices*☒ No☐ Yes. Describe _____**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**☒ No☐ Yes. Describe _____**41. Inventory**☒ No☐ Yes. Describe _____**42. Interests in partnerships or joint ventures**☒ No☐ Yes. Describe Name of entity: _____

% of ownership: _____

43. Customer lists, mailing lists, or other compilations☒ No☐ Yes. **Do your lists include personally identifiable information as defined in 11 U.S.C. § 101(41A)?**☐ No☐ Yes. Describe _____

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known) _____

44. Any business-related property you did not already list

- ☒ No
☐ Yes. Give specific information.

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here..... →**\$0.00**
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
 If you own or have an interest in farmland, list it in Part 1.
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- ☒ No. Go to Part 7.
☐ Yes. Go to line 47.

**Current value of the
portion you own?**
 Do not deduct secured
claims or exemptions.

47. Farm animals*Examples: Livestock, poultry, farm-raised fish*

- ☒ No
☐ Yes.. _____

48. Crops--either growing or harvested

- ☒ No
☐ Yes. Give specific information..... _____

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

- ☒ No
☐ Yes.. _____

50. Farm and fishing supplies, chemicals, and feed

- ☒ No
☐ Yes.. _____

51. Any farm- and commercial fishing-related property you did not already list

- ☒ No
☐ Yes. Give specific information..... _____

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here..... →**\$0.00**

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**53. Do you have other property of any kind you did not already list?***Examples: Season tickets, country club membership*☒ No☐ Yes. Give specific information.**54. Add the dollar value of all of your entries from Part 7. Write that number here.....** →**\$0.00****Part 8: List the Totals of Each Part of this Form****55. Part 1: Total real estate, line 2.....** → **\$499,685.38****56. Part 2: Total vehicles, line 5** \$16,500.00**57. Part 3: Total personal and household items, line 15** \$7,600.00**58. Part 4: Total financial assets, line 36** \$25.00**59. Part 5: Total business-related property, line 45** \$0.00**60. Part 6: Total farm- and fishing-related property, line 52** \$0.00**61. Part 7: Total other property not listed, line 54** **+** \$0.00**62. Total personal property** Add lines 56 through 61.....\$24,125.00Copy personal
property total →**+** \$24,125.00**63. Total of all property on Schedule A/B** Add line 55 + line 62.....**\$523,810.38**

Debtor 1 **David Joe Vilardi**
 Carolyn Dot Vilardi

Case number (if known) _____

10. Firearms (details):

| | |
|---------------|-----------------|
| AR 15 | <u>\$500.00</u> |
| Winchester 30 | <u>\$50.00</u> |
| | <u>\$150.00</u> |

13. Non-farm animals (details):

| | |
|----------|---------------|
| Dogs (3) | <u>\$0.00</u> |
| Cats (2) | <u>\$0.00</u> |

Fill in this information to identify your case:

| | | | |
|--|------------------------------|---------------------------|-----------------------------|
| Debtor 1 | David First Name | Joe Middle Name | Vilardi Last Name |
| Debtor 2 (Spouse, if filing) | Carolyn First Name | Dot Middle Name | Vilardi Last Name |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF TEXAS | | | |
| Case number (if known) _____ | | | |

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property of the Debtor (Official Form 106A/B) as your source, list the property that you claim as exempt. If space is needed, fill out and attach to this page as many copies of this Schedule C as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so

is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|---|--------------------------------------|-----------------------------------|------------------------------------|
|---|--------------------------------------|-----------------------------------|------------------------------------|

Copy the value from Schedule A/B ☐ Check only one box for

| | | | |
|---|---------------------|--|---------------------------------|
| Brief description: 411 North Beverly Dr TR 52-F LOT 1-A 0.85 ACS BLK 5 2 WICHITA GARDENS Line from Schedule A/B: <u>1.1</u> | <u>\$110,000.00</u> | <input checked="" type="checkbox"/> \$58,306.85 <input type="checkbox"/> 100% of fair market value, up to any | Const. art. 16 §§ 50, 51, Texas |
|---|---------------------|--|---------------------------------|

| | | | |
|--|--------------------|---|--|
| Brief description: 2013 Nissan Rogue (approx. 60,000 miles) Line from Schedule A/B: <u>3.1</u> | <u>\$15,000.00</u> | <input checked="" type="checkbox"/> \$2,811.00 <input type="checkbox"/> 100% of fair market value, up to any | Tex. Prop. Code §§ 42.001(a), 42.002(a)(9) |
|--|--------------------|---|--|

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☒ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☐ Yes

Debtor 1 **David Joe Vilardi**
Carolyn Dot Vilardi

Case number (if known) _____

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property **Current value of the portion you own** **Amount of the exemption you claim** **Specific laws that allow exemption**

Copy the value from Schedule A/B Check only one box for

Brief description:
2001 Ford F150 (approx. 184,000 miles)
Line from Schedule A/B: 3.2

\$1,500.00 ☒ \$1,500.00
☐ 100% of fair market value, up to any

Tex. Prop. Code §§ 42.001(a),

Brief description:
Appliances
Couch
Line from Schedule A/B: 6

\$1,500.00 ☒ \$1,500.00
☐ 100% of fair market value, up to any

Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)

Brief description:
TV (3)
Cell Phone
Line from Schedule A/B: 7

\$300.00 ☒ \$300.00
☐ 100% of fair market value, up to any

Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)

Brief description:
AR 15
Line from Schedule A/B: 10

\$500.00 ☒ \$500.00
☐ 100% of fair market value, up to any

Tex. Prop. Code §§ 42.001(a),

Brief description:
Winchester 30
Line from Schedule A/B: 10

\$50.00 ☒ \$50.00
☐ 100% of fair market value, up to any

Tex. Prop. Code §§ 42.001(a), 42.002(a)(7)

Brief description:
380 Bursa
Line from Schedule A/B: 10

\$150.00 ☒ \$150.00
☐ 100% of fair market value, up to any

Tex. Prop. Code §§ 42.001(a),

Brief description:
Clothing
Line from Schedule A/B: 11

\$100.00 ☒ \$100.00
☐ 100% of fair market value, up to any

Tex. Prop. Code §§ 42.001(a),

Brief description:
Wedding Rings
Diamond Necklace
Gold Rings
Line from Schedule A/B: 12

\$5,000.00 ☒ \$5,000.00
☐ 100% of fair market value, up to any

Tex. Prop. Code §§ 42.001(a), 42.002(a)(6)

Fill in this information to identify your case:

| | | | |
|--|---|--|--|
| Debtor 1 | David <small>First Name</small> | Joe <small>Middle Name</small> | Vilardi <small>Last Name</small> |
| Debtor 2 (Spouse, if filing) | Carolyn <small>First Name</small> | Dot <small>Middle Name</small> | Vilardi <small>Last Name</small> |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF TEXAS | | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in

| <i>Column A</i> Amount of claim Do not deduct the value of collateral | <i>Column B</i> Value of collateral that supports this claim | <i>Column C</i> Unsecured portion If any |
|--|--|---|
|--|--|---|

2.1 Describe the property that secures the claim:

\$12,189.00

\$15,000.00

Ally FinancialCreditor's name

2013 Nissan Rogue

Attn: Bankruptcy DeptNumber Street**PO Box 380901****Bloomington MN 55438**City State ZIP Code**Who owes the debt?** Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☒ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☒ Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
- ☐ Statutory lien (such as tax lien, mechanic's lien)
- ☐ Judgment lien from a lawsuit
- ☒ Other (including a right to offset)

Automobile

Date debt was incurred **03/2018**Last 4 digits of account number **4 8 2 7**

Add the dollar value of your entries in Column A on this page. Write that number here:

\$12,189.00

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

Part 1:**Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral

Column B

Value of collateral

that supports this claim

Column C

Unsecuredportion
If any

2.2

Describe the property that secures the claim:

\$48,200.00

\$49,856.92

Jacksboro National Bank

Creditor's name

4245 Kemp Blvd STE 420

Number Street

409 North Beverly Drive

As of the date you file, the claim is: Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☒ Other (including a right to offset)

Secured

Who owes the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ **Check if this claim relates to a community debt**

Date debt was incurred

Last 4 digits of account number

2.3

Describe the property that secures the claim:

\$90,000.00

\$97,697.98

Jacksboro National Bank

Creditor's name

4245 Kemp Blvd STE 420

Number Street

2402 Lansing Blvd

As of the date you file, the claim is: Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☒ Other (including a right to offset)

Secured

Who owes the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ **Check if this claim relates to a community debt**

Date debt was incurred

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

\$138,200.00

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

Part 1:**Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral

Column B

Value of collateral

that supports this claim

Column C

Unsecuredportion
If any

2.4

Describe the property that secures the claim:

\$90,000.00

\$98,893.80

Jacksboro National Bank

Creditor's name

4245 Kemp Blvd STE 420

Number Street

1503 Grant Street

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Wichita Falls TX 76308

City State ZIP Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ **Check if this claim relates to a community debt****Nature of lien.** Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset)
Mortgage

Date debt was incurred

Last 4 digits of account number

2.5

Describe the property that secures the claim:

\$90,000.00

\$94,629.36

Jacksboro National Bank

Creditor's name

4245 Kemp Blvd STE 420

Number Street

1707 Pearl Avenue

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Wichita Falls TX 76308

City State ZIP Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ **Check if this claim relates to a community debt****Nature of lien.** Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset)
Mortgage

Date debt was incurred

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

\$180,000.00

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

Part 1:**Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral

Column B

Value of collateral

that supports this claim

Column C

Unsecuredportion
If any

2.6

Jacksboro National Bank

Creditor's name

4245 Kemp Blvd STE 420

Number Street

Describe the property that
secures the claim:

121 North Avenue D

\$48,200.00

\$48,607.32

Wichita Falls TX 76308

City State ZIP Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ Check if this claim relates
to a community debt

Date debt was incurred

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset)
Mortgage

Last 4 digits of account number

2.7

Union Square Federal Credit Union

Creditor's name

Attn: Bankruptcy Dept

Number Street

1401 Holliday StDescribe the property that
secures the claim:

411 North Beverly

\$49,649.00

\$110,000.00

Wichita Falls TX 76301

City State ZIP Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ Check if this claim relates
to a community debtDate debt was incurred **04/06/2018****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset)
Conventional Real Estate Mortgage

Last 4 digits of account number **0 5 0 2**Add the dollar value of your entries in Column A on this page. Write
that number here:

\$97,849.00

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

Part 1:**Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral

Column B

Value of collateral

that supports this claim

Column C

Unsecuredportion
If any

2.8

Wichita Co, Burkburnett City & ISD

Creditor's name

c/o Perdue Brandon & Fielder

Number Street

PO Box 8188Describe the property that
secures the claim:

121 North Avenue D

\$407.32**\$48,607.32****As of the date you file, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☒ Other (including a right to offset)

Property Taxes

Who owes the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ **Check if this claim relates
to a community debt**

Date debt was incurred

Last 4 digits of account number

2.9

Wichita County

Creditor's name

c/o Perdue Brandon Fielder Collins & M

Number Street

PO Box 8188Describe the property that
secures the claim:

411 N Beverly Dr

\$2,044.15**\$110,000.00****As of the date you file, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☒ Other (including a right to offset)

Property Taxes

Who owes the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ **Check if this claim relates
to a community debt**

Date debt was incurred

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write
that number here:**\$2,451.47**

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

Part 1:**Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral

Column B

Value of collateral

that supports this claim

Column C

Unsecuredportion
If any

2.10

Wichita County

Creditor's name

c/o PerdueBrandonFielderCollins&M

Number Street

PO Box 8188Describe the property that
secures the claim:

1503 Grant Street

\$2,906.84**\$98,893.80****As of the date you file, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☒ Other (including a right to offset)

Property Taxes

Who owes the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ **Check if this claim relates
to a community debt**

Date debt was incurred

Last 4 digits of account number

2.11

Wichita County

Creditor's name

c/o PerdueBrandonFielderCollins&M

Number Street

PO Box 8188Describe the property that
secures the claim:

2402 Lansing Blvd

\$2,570.69**\$97,697.98****As of the date you file, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☒ Other (including a right to offset)

Property Taxes

Who owes the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ **Check if this claim relates
to a community debt**

Date debt was incurred

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write
that number here:**\$5,477.53**

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

Part 1:**Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral

Column B

Value of collateral

that supports this claim

Column C

Unsecuredportion
If any

2.12

Wichita County

Creditor's name

c/o PerdueBrandonFielderCollins&M

Number Street

PO Box 8188Describe the property that
secures the claim:

1707 Pearl Avenue

\$1,515.31**\$94,629.36****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset)
Property Taxes

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ **Check if this claim relates
to a community debt**

Date debt was incurred

Last 4 digits of account number

2.13

Wichita County

Creditor's name

c/o PerdueBrandonFielderCollins&M

Number Street

PO Box 8188Describe the property that
secures the claim:

409 North Beverly

\$1,656.92**\$49,856.92****As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☒ Other (including a right to offset)
Property Taxes

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ **Check if this claim relates
to a community debt**

Date debt was incurred

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write
that number here:**\$3,172.23**

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

Part 1:**Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral

Column B

Value of collateral

that supports this claim

Column C

Unsecuredportion
If any

2.14

Wichita County

Creditor's name

c/o PerdueBrandonFielderCollins&M

Number Street

PO Box 8188Describe the property that
secures the claim:

1503 Grant Street

\$5,986.96**\$98,893.80****As of the date you file, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☒ Other (including a right to offset)

Property Taxes

Who owes the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ **Check if this claim relates
to a community debt**

Date debt was incurred

Last 4 digits of account number

2.15

Wichita County

Creditor's name

c/o PerdueBrandonFielderCollins&M

Number Street

PO Box 8188Describe the property that
secures the claim:

2402 Lansing Blvd

\$5,127.29**\$97,697.98****As of the date you file, the claim is:** Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☒ Other (including a right to offset)

Property Taxes

Who owes the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ **Check if this claim relates
to a community debt**

Date debt was incurred

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write
that number here:**\$11,114.25**

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

Part 1:**Additional Page**

After listing any entries on this page, number them sequentially from the previous page.

Column A

Amount of claim

Do not deduct the value of collateral

Column B

Value of collateral

that supports this claim

Column C

Unsecuredportion
If any

2.16

Describe the property that
secures the claim:

\$3,114.05

\$94,629.36

Wichita County

Creditor's name

c/o PerdueBrandonFielderCollins&M

Number Street

PO Box 8188

1707 Pearl Avenue

As of the date you file, the claim is: Check all that apply.☐ Contingent☐ Unliquidated☐ Disputed**Wichita Falls****TX****76307-8188**

City

State

ZIP Code

Who owes the debt? Check one.☐ Debtor 1 only☐ Debtor 2 only☒ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☒ **Check if this claim relates
to a community debt****Nature of lien.** Check all that apply.☐ An agreement you made (such as mortgage or secured car loan)☐ Statutory lien (such as tax lien, mechanic's lien)☐ Judgment lien from a lawsuit☒ Other (including a right to offset)

Property Taxes

Date debt was incurred _____ Last 4 digits of account number _____

Add the dollar value of your entries in Column A on this page. Write
that number here:

\$3,114.05

If this is the last page of your form, add the dollar value totals from
all pages. Write that number here:

\$453,567.53

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known) _____

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1,

1

Gregory A. Ross

Name

Law Office of Gregory A. Ross, P.C.

Number

Street

4245 Kemp Blvd., Suite 308On which line in Part 1 did you enter the creditor? **2.3**

Last 4 digits of account number _____

Wichita Falls

City

TX

State

76308

ZIP Code

2

Gregory A. Ross

Name

Law Office of Gregory A. Ross, P.C.

Number

Street

4245 Kemp Blvd., Suite 308On which line in Part 1 did you enter the creditor? **2.2**

Last 4 digits of account number _____

Wichita Falls

City

TX

State

76308

ZIP Code

Fill in this information to identify your case:

Debtor 1 **David** **Joe** **Vilardi**
First Name Middle Name Last Name

Debtor 2 **Carolyn** **Dot** **Vilardi**
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the **NORTHERN DISTRICT OF TEXAS**

Case number _____
(if known)

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed on *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims against you?**

- ☐ No. Go to Part 2.
☒ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

| | Total claim | Priority amount | Nonpriority amount |
|------------|-------------------|-------------------|--------------------|
| 2.1 | \$3,015.00 | \$3,015.00 | \$0.00 |

Monte J. White & Associates

Priority Creditor's Name

1106 Brook Ave

Number Street

Last 4 digits of account number _____

When was the debt incurred? **07/11/2019**

As of the date you file, the claim is _____ Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Wichita Falls

City

TX

State

76301

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ Check if this claim is for a community debt
 Is the claim subject to offset?

- ☒ No
☐ Yes

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☒ Other. Specify Attorney fees for this case

Debtor 1 **David Joe Vilardi**
Carolyn Dot Vilardi

Case number (if known) _____

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim,

Total claim

\$11,720.00

4.1

Bank Of America

Nonpriority Creditor's Name

4909 Savarese Circle

Number Street
FL1-908-01-50

Tampa FL 33634
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 3 5 5 5

When was the debt incurred? 03/2015

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

4.2

Bank Of America

Nonpriority Creditor's Name

4909 Savarese Circle

Number Street
FL1-908-01-50

Tampa FL 33634
City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 2 6 8 5

When was the debt incurred? 07/2012

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

\$4,223.00

Debtor 1 **David Joe Vilardi**
Carolyn Dot Vilardi

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.3

\$29,249.00

Capital One

Nonpriority Creditor's Name

Attn: **Bankruptcy**

Number Street

PO Box 30285

Salt Lake City

UT

84130

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 1 1 6 7

When was the debt incurred? 07/19/2011

As of the date you file, the claim is ☐ Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

4.4

\$5,294.00

Chase Card Services

Nonpriority Creditor's Name

Attn: **Bankruptcy**

Number Street

PO Box 15298

Wilmington

DE

19850

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number 9 6 0 4

When was the debt incurred? 03/2014

As of the date you file, the claim is ☐ Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
Credit Card

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.5

\$5,676.00**Discover Financial**

Nonpriority Creditor's Name

Attn: Bankruptcy DepartmentNumber Street
PO Box 15316**Wilmington DE 19850**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ **Check if this claim is for a community debt****Is the claim subject to offset?**

- ☒ No
☐ Yes

Last 4 digits of account number 6 2 6 8**When was the debt incurred?** 10/2005**As of the date you file, the claim is** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
 Credit Card

4.6

\$1,834.00**Emergency Physician Billing**

Nonpriority Creditor's Name

Po Box 206676

Number Street

Dallas TX 75320

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ **Check if this claim is for a community debt****Is the claim subject to offset?**

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____**As of the date you file, the claim is** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
 Medical

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.7

\$7,430.00**Jack C. Askins, M.D.**

Nonpriority Creditor's Name

1100 Brook Ave

Number Street

Wichita Falls**TX****76301**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ **Check if this claim is for a community debt****Is the claim subject to offset?**

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Medical**

4.8

\$725.00**La Magna Health, PLLC**

Nonpriority Creditor's Name

PO Box 14000

Number Street

Belfast**ME****04915**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ **Check if this claim is for a community debt****Is the claim subject to offset?**

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____**As of the date you file, the claim is:** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Medical**

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.9

\$5,302.18**LVNV Funding**

Nonpriority Creditor's Name

PO Box 51660

Number Street

Sparks**NV****89435**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
 Unsecured

4.10

\$95.25**Radiology Associates of WF, PA**

Nonpriority Creditor's Name

PO Box 732877

Number Street

Dallas**TX****75373**

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ Check if this claim is for a community debt

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____

As of the date you file, the claim is Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify
 Medical

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known) _____

Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.11

\$46,944.96**United Regional**

Nonpriority Creditor's Name

Attn: Billing Dept.

Number Street

1600 11th Street**Wichita Falls****TX****76301**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ **Check if this claim is for a community debt****Is the claim subject to offset?**

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____**As of the date you file, the claim is** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Medical**

4.12

\$1.00**US Bank National Association**

Nonpriority Creditor's Name

Attn: Bankruptcy Dept.

Number Street

4801 Frederica Street**Owensboro****KY****42301**

City

State

ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☒ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☒ **Check if this claim is for a community debt****Is the claim subject to offset?**

- ☒ No
☐ Yes

Last 4 digits of account number _____

When was the debt incurred? _____**As of the date you file, the claim is** Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☒ Other. Specify **Unsecured**

Debtor 1 **David Joe Vilardi**
Carolyn Dot Vilardi

Case number (if known) _____

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2.

For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified

Citi Bank

Name

Government Commerce Services

Number Street

P.O. Box 6575

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

The Lakes

City

NV

State

88901-6575

ZIP Code

Last 4 digits of account number

Scott & Associates, PC

Name

PO Box 115220

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Carrollton

City

TX

State

75011

ZIP Code

Last 4 digits of account number

Titanium Emergency Group,LLP

Name

PO Box 206676

Number Street

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☒ Part 2: Creditors with Nonpriority Unsecured Claims

Dallas

City

TX

State

75320

ZIP Code

Last 4 digits of account number

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.
28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

| | | Total claim |
|--------------------------|--|-------------------------|
| Total claims from Part 1 | 6a. Domestic support obligations | 6a. <u>\$0.00</u> |
| | 6b. Taxes and certain other debts you owe the government | 6b. <u>\$0.00</u> |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. <u>\$0.00</u> |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here | 6d. + <u>\$3,015.00</u> |
| | 6e. Total. Add lines 6a through 6d. | 6d. <u>\$3,015.00</u> |

| | | Total claim |
|--------------------------|---|---------------------------|
| Total claims from Part 2 | 6f. Student loans | 6f. <u>\$0.00</u> |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. <u>\$0.00</u> |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. <u>\$0.00</u> |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here | 6i. + <u>\$118,494.39</u> |
| | 6j. Total. Add lines 6f through 6i. | 6j. <u>\$118,494.39</u> |

Fill in this information to identify your case:

| | | | |
|--|---|--|--|
| Debtor 1 | David <small>First Name</small> | Joe <small>Middle Name</small> | Vilardi <small>Last Name</small> |
| Debtor 2 (Spouse, if filing) | Carolyn <small>First Name</small> | Dot <small>Middle Name</small> | Vilardi <small>Last Name</small> |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF TEXAS | | | |
| Case number (if known) | | | |

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases**12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this

1. Do you have any executory contracts or unexpired leases?

- ☒ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule D: Property (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease State what the contract or lease is for

Fill in this information to identify your case:

| | | | |
|--|---|--|--|
| Debtor 1 | David <small>First Name</small> | Joe <small>Middle Name</small> | Vilardi <small>Last Name</small> |
| Debtor 2 (Spouse, if filing) | Carolyn <small>First Name</small> | Dot <small>Middle Name</small> | Vilardi <small>Last Name</small> |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF TEXAS | | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors**12/15**

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible.

If

two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

- ☒ No
☐ Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☐ No. Go to line 3.
☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
☐ No
☒ Yes

In which community state or territory did you live? Texas Fill in the name and current address of that person.

Carolyn Dot Vilardi

Name of your spouse, former spouse, or legal equivalent

411 N Beverly Drive

Number Street

Wichita Falls

City

TX

State

76306

ZIP Code

In which community state or territory did you live? Texas Fill in the name and current address of that person.

David Joe Vilardi

Name of your spouse, former spouse, or legal equivalent

411 N Beverly Drive

Number Street

Wichita Falls

City

TX

State

76306

ZIP Code

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known) _____

- 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Fill in this information to identify your case:

| | | | |
|--|----------------|-------------|----------------|
| Debtor 1 | David | Joe | Vilardi |
| | First Name | Middle Name | Last Name |
| Debtor 2 (Spouse, if filing) | Carolyn | Dot | Vilardi |
| | First Name | Middle Name | Last Name |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF TEXAS | | | |
| Case number (if known) | _____ | | |

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income**12/15**

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write

Part 1: Describe Employment**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

| | <u>Debtor 1</u> | <u>Debtor 2 or non-filing spouse</u> |
|---------------------------|---|---|
| Employment status | <input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed | <input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed |
| Occupation | _____ | _____ |
| Employer's name | Red River Hospital | _____ |
| Employer's address | 6515 Kemp | _____ |
| | Number Street | Number Street |
| | _____ | _____ |
| | _____ | _____ |
| | Wichita Falls TX 76308 | _____ |
| | City State Zip Code | City State Zip Code |

How long employed there? _____

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If

| | <u>For Debtor 1</u> | <u>For Debtor 2 or non-filing spouse</u> |
|--|----------------------|--|
| 2. List monthly gross wages, salary, and commissions (include all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | 2. <u>\$2,054.99</u> | <u>\$0.00</u> |
| 3. Estimate and list monthly overtime pay. | 3. + <u>\$0.00</u> | <u>\$0.00</u> |
| 4. Calculate gross income. Add line 2 + line 3. | 4. <u>\$2,054.99</u> | <u>\$0.00</u> |

Debtor 1 **David Joe Vilardi**
Carolyn Dot Vilardi

Case number (if known) _____

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|---|---------------------|-----------------------------------|
| Copy line 4 here → 4. | \$2,054.99 | \$0.00 |
| 5. List all payroll deductions: | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. \$183.41 | \$0.00 |
| 5b. Mandatory contributions for retirement plans | 5b. \$195.22 | \$0.00 |
| 5c. Voluntary contributions for retirement plans | 5c. \$0.00 | \$0.00 |
| 5d. Required repayments of retirement fund loans | 5d. \$0.00 | \$0.00 |
| 5e. Insurance | 5e. \$392.65 | \$0.00 |
| 5f. Domestic support obligations | 5f. \$0.00 | \$0.00 |
| 5g. Union dues | 5g. \$0.00 | \$0.00 |
| 5h. Other deductions. Specify: <u>See continuation sheet</u> | 5h. \$38.19 | \$0.00 |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. | \$809.47 | \$0.00 |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | \$1,245.52 | \$0.00 |
| 8. List all other income regularly received: | | |
| 8a. Net income from rental property and from operating a Attach a statement for each property and business showing gross receipts, ordinary and necessary business | 8a. \$0.00 | \$0.00 |
| 8b. Interest and dividends | 8b. \$0.00 | \$0.00 |
| 8c. Family support payments that you, a non-filing spouse, or a Include alimony, spousal support, child support, maintenance, | 8c. \$0.00 | \$0.00 |
| 8d. Unemployment compensation | 8d. \$0.00 | \$0.00 |
| 8e. Social Security | 8e. \$0.00 | \$1,562.00 |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance) Specify: _____ | 8f. \$0.00 | \$0.00 |
| 8g. Pension or retirement income | 8g. \$0.00 | \$0.00 |
| 8h. Other monthly income. Specify: _____ | 8h. \$0.00 | \$0.00 |
| 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. | \$0.00 | \$1,562.00 |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | \$1,245.52 | \$1,562.00 |
| 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Specify: _____ | \$0.00 | \$0.00 |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies. | \$2,807.52 | \$2,807.52 |
| 13. Do you expect an increase or decrease within the year after you file this form? <input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes. Explain _____ | None. | |

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known) _____

| | For Debtor 1 | For Debtor 2 or non-filing spouse |
|---|----------------|--------------------------------------|
| 5h. Other Payroll Deductions (details) | | |
| <u>Disability Insurance</u> | <u>\$13.34</u> | <u> </u> |
| <u>Life Insurance</u> | <u>\$9.50</u> | <u> </u> |
| <u>Dependent Life Insurance</u> | <u>\$1.38</u> | <u> </u> |
| <u>401K</u> | <u>\$13.97</u> | <u> </u> |
| Totals: | \$38.19 | \$0.00 |

Fill in this information to identify your case:

| | | | |
|--|------------------------------|---------------------------|-----------------------------|
| Debtor 1 | David First Name | Joe Middle Name | Vilardi Last Name |
| Debtor 2 (Spouse, if filing) | Carolyn First Name | Dot Middle Name | Vilardi Last Name |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF TEXAS | | | |
| Case number (if known) | _____ | | |

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J**Schedule J: Your Expenses****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write

Part 1: Describe Your Household**1. Is this a joint case?**

- ☐ No. Go to line 2.
- ☒ Yes. **Does Debtor 2 live in a separate household?**
- ☒ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents? ☐ No

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☒ Yes. Fill out this information for each dependent.....

| Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
|---|------------------------|--|
| <u>Grandchild</u> | <u>11</u> | <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes |
| <u>Grandchild</u> | <u>5</u> | <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes |
| _____ | _____ | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| _____ | _____ | <input type="checkbox"/> No <input type="checkbox"/> Yes |
| _____ | _____ | <input type="checkbox"/> No <input type="checkbox"/> Yes |

- 3. Do your expenses include expenses of people other than yourself and your dependents?**
- ☒ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

Your expenses

- 4. The rental or home ownership expenses for your residence.**
- Include first mortgage payments and any rent for the ground or lot.
- If not included in line 4:**

4. \$500.53

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

4a. _____

4b. _____

4c. _____

4d. _____

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known) _____

Your expenses

| | | |
|--|------|-----------------|
| 5. Additional mortgage payments for your residence , as home equity loans | 5. | _____ |
| 6. Utilities: | | |
| 6a. Electricity, heat, natural gas | 6a. | <u>\$150.00</u> |
| 6b. Water, sewer, garbage collection | 6b. | <u>\$100.00</u> |
| 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | <u>\$200.00</u> |
| 6d. Other. Specify: <u>cell phone</u> | 6d. | <u>\$114.00</u> |
| 7. Food and housekeeping supplies | 7. | <u>\$552.66</u> |
| 8. Childcare and children's education costs | 8. | _____ |
| 9. Clothing, laundry, and dry cleaning | 9. | <u>\$100.00</u> |
| 10. Personal care products and services | 10. | <u>\$100.00</u> |
| 11. Medical and dental expenses | 11. | <u>\$200.00</u> |
| 12. Transportation Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | <u>\$150.00</u> |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | _____ |
| 14. Charitable contributions and religious donations | 14. | _____ |
| 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | 15a. | _____ |
| 15b. Health insurance | 15b. | _____ |
| 15c. Vehicle insurance | 15c. | <u>\$121.33</u> |
| 15d. Other insurance. Specify: _____ | 15d. | _____ |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____ | 16. | _____ |
| 17. Installment or lease payments: | | |
| 17a. Car payments for Vehicle 1 <u>Car Payment on Nissan</u> | 17a. | <u>\$319.00</u> |
| 17b. Car payments for Vehicle 2 | 17b. | _____ |
| 17c. Other. Specify: _____ | 17c. | _____ |
| 17d. Other. Specify: _____ | 17d. | _____ |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | _____ |
| 19. Other payments you make to support others who do not live with you. Specify: _____ | 19. | _____ |

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known) _____

20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.

| | |
|---|------------|
| 20a. Mortgages on other property | 20a. _____ |
| 20b. Real estate taxes | 20b. _____ |
| 20c. Property, homeowner's, or renter's insurance | 20c. _____ |
| 20d. Maintenance, repair, and upkeep expenses | 20d. _____ |
| 20e. Homeowner's association or condominium dues | 20e. _____ |

21. Other. Specify: _____ 21. **+** _____

22. Calculate your monthly expenses.

| | |
|---|------------------------|
| 22a. Add lines 4 through 21. | 22a. <u>\$2,607.52</u> |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. | 22b. _____ |
| 22c. Add line 22a and 22b. The result is your monthly expenses. | 22c. <u>\$2,607.52</u> |

23. Calculate your monthly net income.

| | |
|---|-------------------------|
| 23a. Copy line 12 (your combined monthly income) from Schedule I. | 23a. <u>\$2,807.52</u> |
| 23b. Copy your monthly expenses from line 22c above. | 23b. <u>-\$2,607.52</u> |
| 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c. <u>\$200.00</u> |

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage

☒ No.☐ Yes.

Explain here:
None.

Fill in this information to identify your case:

| | | | |
|--|---|--|--|
| Debtor 1 | David <small>First Name</small> | Joe <small>Middle Name</small> | Vilardi <small>Last Name</small> |
| Debtor 2 (Spouse, if filing) | Carolyn <small>First Name</small> | Dot <small>Middle Name</small> | Vilardi <small>Last Name</small> |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF TEXAS | | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended

Part 1: Summarize Your Assets**Your assets**

Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)1a. Copy line 55, Total real estate, from Schedule A/B..... **\$499,685.38**1b. Copy line 62, Total personal property, from Schedule A/B..... **\$24,125.00**1c. Copy line 63, Total of all property on Schedule A/B..... **\$523,810.38****Part 2: Summarize Your Liabilities****Your liabilities**

Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D..... **\$453,567.53**3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... **\$3,015.00**3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... + **\$118,494.39****Your total liabilities****\$575,076.92****Part 3: Summarize Your Income and Expenses**4. *Schedule I: Your Income* (Official Form 106I)Copy your combined monthly income from line 12 of Schedule I..... **\$2,807.52**5. *Schedule J: Your Expenses* (Official Form 106J)Copy your monthly expenses from line 22c of Schedule J..... **\$2,607.52**

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

Part 4: Answer These Questions for Administrative and Statistical Records**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
- ☒ Yes

7. What kind of debt do you have?

- ☒ **Your debts are primarily consumer debts.** Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- ☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income, copy your total current monthly income from Official Form 122A-1 Line 10, OR, Form 122B Line 10, OR, Form 122C-1 Line 14.**\$6,854.99****9. Copy the following special categories of claims from Part 4, line 8, to Schedule E/F:****Total claim****From Part 4 or Schedule E/F, copy the following:**

| | |
|--|----------------------|
| 9a. Domestic support obligations. (Copy line 6a.) | <u>\$0.00</u> |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | <u>\$0.00</u> |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | <u>\$0.00</u> |
| 9d. Student loans. (Copy line 6f.) | <u>\$0.00</u> |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | <u>\$0.00</u> |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + | <u>\$0.00</u> |
| 9g. Total. Add lines 9a through 9f. | <u>\$0.00</u> |

Fill in this information to identify your case:

| | | | |
|--|---|--|--|
| Debtor 1 | David <small>First Name</small> | Joe <small>Middle Name</small> | Vilardi <small>Last Name</small> |
| Debtor 2 (Spouse, if filing) | Carolyn <small>First Name</small> | Dot <small>Middle Name</small> | Vilardi <small>Last Name</small> |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF TEXAS | | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are

X /s/ David Joe Vilardi _____

David Joe Vilardi, Debtor 1

Date **07/30/2019**
MM / DD / YYYY

X /s/ Carolyn Dot Vilardi _____

Carolyn Dot Vilardi, Debtor 2

Date **07/30/2019**
MM / DD / YYYY

Fill in this information to identify your case:

| | | | |
|--|---|--|--|
| Debtor 1 | David <small>First Name</small> | Joe <small>Middle Name</small> | Vilardi <small>Last Name</small> |
| Debtor 2 (Spouse, if filing) | Carolyn <small>First Name</small> | Dot <small>Middle Name</small> | Vilardi <small>Last Name</small> |
| United States Bankruptcy Court for the NORTHERN DISTRICT OF TEXAS | | | |
| Case number (if known) | _____ | | |

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages,

Part 1: Give Details About Your Marital Status and Where You Lived Before**1. What is your current marital status?**

- ☒ Married
☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?
(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☐ No
☒ Yes. Make sure you fill out *Schedule H: Your Creditors* (Official Form 106H).

Part 2: Explain the Sources of Your Income

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
- ☒ Yes. Fill in the details.

| | Debtor 1 | Debtor 2 |
|---|--|---|
| | Sources of income Check all that apply. | Sources of income Check all that apply. |
| | Gross income (before deductions and exclusions) | Gross income (before deductions and exclusions) |
| From January 1 of the current year until | <input checked="" type="checkbox"/> Wages, commissions, <input type="checkbox"/> Operating a business | <input type="checkbox"/> Wages, commissions, <input type="checkbox"/> Operating a business |
| | \$14,384.93 | |
| For the last calendar year: | <input checked="" type="checkbox"/> Wages, commissions, <input type="checkbox"/> Operating a business | <input type="checkbox"/> Wages, commissions, <input type="checkbox"/> Operating a business |
| (January 1 to December 31 ²⁰¹⁸) | \$5,564.00 | |
| | | |
| For the calendar year before that: | <input checked="" type="checkbox"/> Wages, commissions, <input type="checkbox"/> Operating a business | <input type="checkbox"/> Wages, commissions, <input type="checkbox"/> Operating a business |
| (January 1 to December 31 ²⁰¹⁷) | \$25,244.00 | |
| | | |

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under

- ☐ No
- ☒ Yes. Fill in the details.

| | Debtor 1 | | Debtor 2 | |
|---|--------------------------------------|---|--------------------------------------|---|
| | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| From January 1 of the current year until | | | Social Security | \$10,934.00 |
| | | | | |
| | | | | |
| For the last calendar year: (January 1 to December 31, 2018) YYYY | Pension | \$13,054.00 | Social Security | \$18,240.00 |
| | | | | |
| | | | | |
| For the calendar year before that: (January 1 to December 31, 2017) YYYY | Gambling Winnings | \$10,046.00 | Social Security | \$4,635.00 |
| | | | | |

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known)

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- ☐ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

- ☒ Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☒ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?
Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic

☒ No

☐ Yes. List all payments to an insider.

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

☒ No

☐ Yes. List all payments that benefited an insider.

Part 4: Identify Legal Actions, Repossessions, and Foreclosures**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody

☐ No

☒ Yes. Fill in the details.

Case title

LVNV Funding LLC VS. Carolyn
D Kidwell

Nature of the case

Citation for Debt Claims

Court or agency

Justice of the Peace Precinct 1 Place
1, Wichita County

Court Name

900 7th Street Rm 281

Number Street

Status of the case

☒ Pending

☐ On appeal

☐ Concluded

Case number DC1837

Wichita Falls

City

TX

State

76301

ZIP Code

Debtor 1 **David Joe Vilardi**
Carolyn Dot Vilardi

Case number (if known) _____

| | | | |
|-------------------------------------|---------------------------|--|---|
| Case title | Nature of the case | Court or agency | Status of the case |
| LVNV Funding LLC VS David J Vilardi | Citation for Debt Claims | Justice of the Peace Precinct 1 Place 1, Wichita County | <input checked="" type="checkbox"/> Pending |
| Case number <u>DC1856</u> | | Court Name 900 7th St. Rm 281 | <input type="checkbox"/> On appeal |
| | | Number Street | <input type="checkbox"/> Concluded |
| | | Wichita Falls TX 76301 | |
| | | City State ZIP Code | |

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

- ☒ No. Go to line 11.
☐ Yes. Fill in the information below.

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

- ☒ No
☐ Yes. Fill in the details.

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of

- ☒ No
☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

- ☒ No
☐ Yes. Fill in the details for each gift.

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600

- ☒ No
☐ Yes. Fill in the details for each gift or contribution.

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire,

- ☒ No
☐ Yes. Fill in the details.

Debtor 1 **David Joe Vilardi**
Carolyn Dot Vilardi

Case number (if known) _____

Part 7: List Certain Payments or Transfers

- 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

- ☐ No
☒ Yes. Fill in the details.

| Person Who Was Paid | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|--|---|-----------------------------------|-------------------|
| Monte J. White & Associates | Attorney Fees - \$685 | | |
| Person Who Was Paid | Credit Report - \$66 | | |
| 1106 Brook Ave | Credit Counseling - \$24 | 07/16/2019 | \$1,085.00 |
| Number Street | | | |

Wichita Falls TX 76301
 City State ZIP Code
legal@montejwhite.com
 Email or website address

Person Who Made the Payment, if Not You

- 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to**

Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

- 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than**

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property).

- ☒ No
☐ Yes. Fill in the details.

- 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)**

- ☒ No
☐ Yes. Fill in the details.

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known) _____

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage

- ☒ No
☐ Yes. Fill in the details.

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☒ No
☐ Yes. Fill in the details.

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No
☐ Yes. Fill in the details.

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No
☐ Yes. Fill in the details.

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental

- ☒ No
☐ Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Fill in the details.

Debtor 1 **David Joe Vilardi**
Carolyn Dot Vilardi

Case number (if known) _____

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and

- ☒ No
☐ Yes. Fill in the details.

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A partner in a partnership
☐ An officer, director, or managing executive of a corporation
☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☒ No. None of the above applies. Go to Part 12.
☐ Yes. Check all that apply above and fill in the details below for each business.

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include

- ☐ No
☐ Yes. Fill in the details below.

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years,

X /s/ David Joe Vilardi _____

David Joe Vilardi, Debtor 1

Date 07/30/2019

X /s/ Carolyn Dot Vilardi _____

Carolyn Dot Vilardi, Debtor 2

Date 07/30/2019

Did you attach additional pages to your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

- ☒ No
☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- ☒ No
☐ Yes. Name of person _____ Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

B2030 (Form 2030) (12/15)

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
WICHITA FALLS DIVISION**

In re **David Joe Vilardi**
Carolyn Dot Vilardi

Case No. _____

Chapter **13** _____

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

| | |
|--|-------------------|
| For legal services, I have agreed to accept..... | \$3,700.00 |
| Prior to the filing of this statement I have received..... | \$685.00 |
| Balance Due..... | \$3,015.00 |

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☐ Debtor ☒ Other (specify)
Paid through plan.

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

1. Representation regarding Motions to Lift Stay for post-petition default by Debtor(s): Except one (1) Motion to Lift Stay concerning residence and one (1) Motion to Lift Stay concerning vehicle

2. Motions to Borrow/Incur Debt

3. Motions to Sell Property

4. Motions for Lift Stay for the purpose of Divorce

5. Motions to Reinstate Dismissed Case, except for the First Motion to Reinstate

6. Motions for Hardship Discharge of Chapter 13

7. Motions for Hardship Discharge of Student Loans

8. Motions to Deem Mortgage Loan Current

9. Motions to Retain Excess Tax Refund

10. Motions to Expedite Hearing on any matter

11. Motions to Reopen Case to Obtain Discharge

12. Preparation and filing of Plan Modifications After Confirmation

13. Court fees required to amend schedules to add creditors not originally provided to attorney

14. Representation in evidentiary hearing on ANY Motions to Lift Stay, or evidentiary hearing of more than 30 minutes on Motions to Dismiss, Objections to Exemptions, Confirmation Hearings, Objection to Claims, Objections to Discharge or other contested matters

15. Representation in Adversary Proceedings

16. Representation in loan modification and/or loss mitigation process

17. Conversions to other Chapters of Bankruptcy

18. Research, analyzation and compilation of documentation for complex objections to claims

19. Motions to Employ Special Counsel

20. Motions for Approval of Settlement Agreements

B2030 (Form 2030) (12/15)

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

07/30/2019

Date

/s/ MONTE J WHITE

MONTE J WHITE

Monte J. White & Associates, P.C

1106 Brook Avenue

Wichita Falls, Texas 76301

Bar No. 00785232

/s/ David Joe Vilardi

David Joe Vilardi

/s/ Carolyn Dot Vilardi

Carolyn Dot Vilardi

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
WICHITA FALLS DIVISION**

IN RE: **David Joe Vilardi**
Carolyn Dot Vilardi

CASE NO

CHAPTER **13**

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the list of creditors filed in this case is true and correct to the best of his/her knowledge.

Date 7/30/2019

Signature **/s/ David Joe Vilardi**
David Joe Vilardi

Date 7/30/2019

Signature **/s/ Carolyn Dot Vilardi**
Carolyn Dot Vilardi

Ally Financial
Attn: Bankruptcy Dept
PO Box 380901
Bloomington, MN 55438

Bank Of America
4909 Savarese Circle
FL1-908-01-50
Tampa, FL 33634

Capital One
Attn: Bankruptcy
PO Box 30285
Salt Lake City, UT 84130

Chase Card Services
Attn: Bankruptcy
PO Box 15298
Wilmington, DE 19850

Citi Bank
Government Commerce Services
P.O. Box 6575
The Lakes, NV 88901-6575

Discover Financial
Attn: Bankruptcy Department
PO Box 15316
Wilmington, DE 19850

Emergency Physician Billing
Po Box 206676
Dallas, TX 75320

Gregory A. Ross
Law Office of Gregory A. Ross, P.C.
4245 Kemp Blvd., Suite 308
Wichita Falls TX 76308

IRS SPECIAL PROCEDURES
1100 COMMERCE ST ROOM 951
MAIL STOP 5029 DAL
DALLAS TX 75246

Jack C. Askins, M.D.
1100 Brook Ave
Wichita Falls TX 76301

Jacksboro National Bank
4245 Kemp Blvd STE 420
Wichita Falls, TX 76308

La Magna Health, PLLC
PO Box 14000
Belfast, ME 04915

LVNV Funding
PO Box 51660
Sparks, NV 89435

Monte J. White & Associates
1106 Brook Ave
Wichita Falls TX 76301

Radiology Associates of WF, PA
PO Box 732877
Dallas, TX 75373

Scott & Associates, PC
PO Box 115220
Carrollton, TX 75011

Titanium Emergency Group,LLP
PO Box 206676
Dallas, TX 75320

Union Square Federal Credit Union
Attn: Bankruptcy Dept
1401 Holliday St
Wichita Falls, TX 76301

United Regional
Attn: Billing Dept.
1600 11th Street
Wichita Falls, TX 76301

US Bank National Association
Attn: Bankruptcy Dept.
4801 Frederica Street
Owensboro, KY 42301

Wichita Co, Burkburnett City & ISD
c/o Perdue Brandon & Fielder
PO Box 8188
Wichita Falls, TX 76307

Wichita County
c/o PerdueBrandonFielderCollins&Mott,LLP
PO Box 8188
Wichita Falls, TX 76307-8188

Ally Financial
Attn: Bankruptcy Dept
PO Box 380901
Bloomington, MN 55438

Jacksboro National Bank
4245 Kemp Blvd STE 420
Wichita Falls, TX 76308

Wichita Co, Burkburnett City &
c/o Perdue Brandon & Fielder
PO Box 8188
Wichita Falls, TX 76307

Bank Of America
4909 Savarese Circle
FL1-908-01-50
Tampa, FL 33634

La Magna Health, PLLC
PO Box 14000
Belfast, ME 04915

Wichita County
c/o PerdueBrandonFielderCollins
PO Box 8188
Wichita Falls, TX 76307-8188

Capital One
Attn: Bankruptcy
PO Box 30285
Salt Lake City, UT 84130

LVNV Funding
PO Box 51660
Sparks, NV 89435

Chase Card Services
Attn: Bankruptcy
PO Box 15298
Wilmington, DE 19850

Monte J. White & Associates
1106 Brook Ave
Wichita Falls TX 76301

Citi Bank
Government Commerce Services
P.O. Box 6575
The Lakes, NV 88901-6575

Radiology Associates of WF, PA
PO Box 732877
Dallas, TX 75373

Discover Financial
Attn: Bankruptcy Department
PO Box 15316
Wilmington, DE 19850

Scott & Associates, PC
PO Box 115220
Carrollton, TX 75011

Emergency Physician Billing
Po Box 206676
Dallas, TX 75320

Titanium Emergency Group,LLP
PO Box 206676
Dallas, TX 75320

Gregory A. Ross
Law Office of Gregory A. Ross, P.C.
4245 Kemp Blvd., Suite 308
Wichita Falls TX 76308

Union Square Federal Credit Union
Attn: Bankruptcy Dept
1401 Holliday St
Wichita Falls, TX 76301

IRS SPECIAL PROCEDURES
1100 COMMERCE ST ROOM 951
MAIL STOP 5029 DAL
DALLAS TX 75246

United Regional
Attn: Billing Dept.
1600 11th Street
Wichita Falls, TX 76301

Jack C. Askins, M.D.
1100 Brook Ave
Wichita Falls TX 76301

US Bank National Association
Attn: Bankruptcy Dept.
4801 Frederica Street
Owensboro, KY 42301

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
WICHITA FALLS DIVISION**

IN RE: David Joe Vilardi
Carolyn Dot Vilardi

CASE NO.

CHAPTER 13

Attorney's Affidavit

" I hereby certify that to the best of my knowledge, information, and belief, formed after an inquiry reasonable under the circumstances, that:

It is not being presented for any improper purpose, such as to harass or to cause unnecessary delay or needless increase in the cost of litigation;

The claims, defenses, and other legal contentions therein are warranted by existing law or by a non-frivolous argument for the extension, modification, or reversal of existing law or the establishment of new law;

The allegations and other factual contentions have evidentiary support or, if specifically so identified, are likely to have evidentiary support after a reasonable opportunity for further investigation or discovery; and

The denials of factual contentions are warranted on the evidence or, if specifically so identified, are reasonably based on a lack of information or belief.

All of the above statements made in this Affidavit are true and correct to the best of my knowledge and belief."

/s/Monte J. White
Monte J. White & Associates

Fill in this information to identify your case:

Debtor 1 **David** **Joe** **Vilardi**
First Name Middle Name Last Name

Debtor 2 **Carolyn** **Dot** **Vilardi**
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the **NORTHERN DISTRICT OF TEXAS**

Case number _____
(if known)

Check as directed in lines 17 and 21:

According to the calculations required by this

- ☒ 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
- ☐ 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
- ☒ 3. The commitment period is 3 years.
- ☐ 4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income**1. What is your marital and filing status?** Check one only.

- ☐ **Not married.** Fill out Column A, lines 2-11.
- ☒ **Married.** Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental

| | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse |
|--|----------------------|--|
| 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). | \$2,054.99 | \$0.00 |
| 3. Alimony and maintenance payments. Do not include payments from a spouse. | \$0.00 | \$0.00 |
| 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Do not include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include | \$0.00 | \$0.00 |
| 5. Net income from operating a business, profession, or farm | | |
| Gross receipts (before all deductions) | \$0.00 | \$0.00 |
| Ordinary and necessary operating expenses | \$0.00 | \$0.00 |
| Net monthly income from a business, profession, or farm | \$0.00 | \$0.00 |
| | Copy here → | \$0.00 |

Debtor 1 **David Joe Vilardi**
Carolyn Dot Vilardi

Case number (if known) _____

Column A
Debtor 1

Column B
Debtor 2 or
non-filing spouse

6. Net income from rental and other real property

| | Debtor 1 | Debtor 2 | | |
|---|------------|----------|-------------|------------------------|
| Gross receipts (before all deductions) | \$5,375.00 | \$0.00 | | |
| Ordinary and necessary operating expenses | \$575.00 | \$0.00 | - | |
| Net monthly income from rental or other real property | \$4,800.00 | \$0.00 | Copy here → | \$4,800.00 \$0.00 |

7. Interest, dividends, and royalties

\$0.00 \$0.00

8. Unemployment compensation

\$0.00 \$0.00

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:↓

For you..... \$0.00

For your spouse..... \$0.00

9. Pension or retirement income Do not include any amount received that was a benefit under the Social Security Act.

\$0.00 \$0.00

10. Income from all other sources not listed above Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity,

Total amounts from separate pages, if any.

11. Calculate your total average monthly income.

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

| | | | | | |
|---|------------|---|--------|---|------------------------------|
| + | \$6,854.99 | + | \$0.00 | = | \$6,854.99 |
| | | | | | Total average monthly income |

Part 2: Determine How to Measure Your Deductions from Income

12. Copy your total average monthly income from line 11...... \$6,854.99

13. Calculate the marital adjustment Check one:

- ☐ You are not married. Fill in 0 below.
- ☒ You are married and your spouse is filing with you. Fill in 0 below.
- ☐ You are married and your spouse is not filing with you.
- Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.
- Below, specify the basis for excluding this income and the amount of income devoted to each purpose.
- If

| | | | | | |
|--|--|----|--|--|--|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | </ | | | |

Debtor 1 **David Joe Vilardi**
Carolyn Dot Vilardi

Case number (if known) _____

15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here → **\$6,854.99**
 Multiply line 15a by 12 (the number of months in a year). **X 12**
 15b. The result is your current monthly income for the year for this part of the form. **\$82,259.88**

16. Calculate the median family income that applies to you. Follow these steps:

16a. Fill in the state in which you live. **Texas**
 16b. Fill in the number of people in your household. **4**
 16c. Fill in the median family income for your state and size of household..... **\$83,960.00**
 To find a list of applicable median income amounts, go online using the link specified in the separate

17. How do the lines compare?

- 17a. ☒ Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check **Disposable income is not determined under 11 U.S.C. § 1325(b)(3)**. **Go to Part 3** Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2).
 17b. ☐ Line 15b is more than line 16c. On the top of page 1 of this form, check **Disposable income is determined under 11 U.S.C. § 1325(b)(3)**. **Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2)**. On line 39 of that form, copy your current monthly income from line 14 above.

Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)

18. Copy your total average monthly income from line 11...... **\$6,854.99**

19. Deduct the marital adjustment if it applies. You are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's

19a. If the marital adjustment does not apply, fill in 0 on line 19a. **— \$0.00**
 19b. **Subtract line 19a from line 18.** **\$6,854.99**

20. Calculate your current monthly income for the year. Follow these steps:

20a. Copy line 19b..... **\$6,854.99**
 Multiply by 12 (the number of months in a year). **X 12**
 20b. The result is your current monthly income for the year for this part of the form. **\$82,259.88**
 20c. Copy the median family income for your state and size of household from line 16c..... **\$83,960.00**

21. How do the lines compare?

- ☒ Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, **The commitment period is 3 years**. **Go to Part 4.**
☐ Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, **The commitment period is 5 years**. **Go to Part 4.**

Debtor 1

David Joe Vilardi
Carolyn Dot Vilardi

Case number (if known) _____

Part 4: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

X /s/ David Joe Vilardi _____
David Joe Vilardi, Debtor 1

X /s/ Carolyn Dot Vilardi _____
Carolyn Dot Vilardi, Debtor 2

Date **7/30/2019** _____
MM / DD / YYYY

Date **7/30/2019** _____
MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF TEXAS
WICHITA FALLS DIVISION**

IN RE:

David Joe Vilardi

Carolyn Dot Vilardi

Debtor(s)

§

§

§

§

§

Case No. _____

Chapter 13

**DECLARATION FOR ELECTRONIC FILING OF BANKRUPTCY
PETITION, LISTS, STATEMENTS, AND SCHEDULES**

PART I: DECLARATION OF PETITIONER:

As an individual debtor in this case, or as the individual authorized to act on behalf of the corporation, partnership, or limited liability company seeking bankruptcy relief in this case, I hereby request relief as, or on behalf of, the debtor in accordance with the chapter of title 11, United States Code, specified in the petition to be filed electronically in this case. I have read the information provided in the petition, lists, statements, and schedules to be filed electronically in this case and I HEREBY DECLARE UNDER PENALTY OF PERJURY that the information provided therein, as well as the social security information disclosed in this document, is true and correct. I understand that this Declaration is to be filed with the Bankruptcy Court within five (5) business days after the petition, lists, statements, and schedules have been filed electronically. I understand that a failure to file the signed original of this Declaration will result in the dismissal of my case.

☐ *[Only include for Chapter 7 individual petitioners whose debts are primarily consumer debts] --*
I am an individual whose debts are primarily consumer debts and who has chosen to file under chapter 7. I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each chapter, and choose to proceed under chapter 7.

☐ *[Only include if petitioner is a corporation, partnership or limited liability company] --*
I hereby further declare under penalty of perjury that I have been authorized to file the petition, lists, statements, and schedules on behalf of the debtor in this case.

Date: 7/30/2019/s/ David Joe Vilardi

David Joe Vilardi

Debtor

Soc. Sec. No. xxx-xx-4055/s/ Carolyn Dot Vilardi

Carolyn Dot Vilardi

Joint Debtor

Soc. Sec. No. xxx-xx-1410**PART II: DECLARATION OF ATTORNEY:**

I declare UNDER PENALTY OF PERJURY that: (1) I will give the debtor(s) a copy of all documents referenced by Part I herein which are filed with the United States Bankruptcy Court; and (2) I have informed the debtor(s), if an individual with primarily consumer debts, that he or she may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter.

Date: 7/30/2019/s/ MONTE J WHITE

MONTE J WHITE, Attorney for Debtor